PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 Application of Docket Number 20, 713 492													
CLAIMS AS FILED - PART ((Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OF SMALL ENTITY		
L	OTAL CLAIM	\$	2	20			RATE F			٦	RATE	FEE	
F	OR		NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FEE 385.00		T _{OP}	BASIC FEI		
Ţ	OTAL CHARGE	ABLE CLAIMS	20 11	20 minus 20=		0		XS 9=		OR	XS18=	-	
IN	DEPENDENT (CLAIMS	Y minus 3 =		•	1.	X43=			1	X86=	86	
M	JLTIPLE DEPE	NDENT CLAIM	PRESENT	RESENT						OR	\^00=	106	
• If the difference in column 1 is less than zero, enter "0" in column 2								145=		OR	+290=	-	
^								DTAL	Ц	OR	TOTAL	856	
91	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMALL ENTITY			OR	OTHER		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT. EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	1.20	Minus	- 0	0	a /	X:	S 9=	1	OR	X\$18=		
AME	Independent	ENTATION OF W	y Minus y = /			1 / 1	·x	43 -	/	OR	X86=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							45/		1	+290=		
	3-2-0	3-2-06						OTAL		OR	YOYAL		
	(Column 1) (Column 2) (Column 3)							r. FEE	<u> </u>	OR,	ODIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID FI	ST ER JSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• . ZQ	Minus	-20	2	·A	xs	9≓		OB.	X\$18=		
AME	Incependent	1- 4	Minus	4		-0	X4	3=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								15=		OR	+290=		
								OTAL	·	C L	TOTAL		
(Column 1) (Column 2) (Column 3)								FEE		ΣΑ	DDIT. FEE		
AMENOMENT C .		CLAIMS REMAINING AFTER AMENDMENT		MIGHES NUMBE PREVIOU PAID FO	ST P SLY	PRESENT EXTRA	RA	re .	ADDI- TIONAL FEE	ſ	RATE	ADDI- TIONAL FEE:	
	Total	•	Minus	**		2	XS	9=		OR	X\$19=		
A L	Independent	•	Minus	***		•	X43	-			X86=		
	HIST PRESE	NTATION OF ML	LTIPLE DEF	-~~	-		OR	V003	——				
• H	the entry in colur	+14	Ł		OR L	+290≖							
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE OR ADDIT. FEE													
T	ne Teighest Norm	ber Previously Paid	For" (Total or	Independent	is the	réghesi number	found in t	e appr	opriate box	in colum	nn 1.		

FORM PTO-875 (Rev 10:03)

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